PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail

Mail Stop ISSUE FEE Commissioner for Patents P.O. Box 1450

Alexandria, Virginia 22313-1450

(703) 746-4000

INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 4 should be completed where appropriate. All further correspondence including the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address as indicated unless corrected below or directed otherwise in Block 1, by (a) specifying a new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for maintenance fee notifications.

CURRENT CORRESPONDENCE ADDRESS (Note: Legibly mark-up with any corrections or use Block 1)

7590

SUGHRUE MION, PLLC 2100 Pennsylvania Avenue, NW Washington, DC 20037-3213



Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.

Certificate of Mailing or Transmission
I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO, on the date indicated below.

(Depositor's name) (Signature

APPLICATION NO. FILING DATE FIRST NAMED INVENTOR ATTORNEY DOCKET NO. CONFIRMATION NO 09/686,959 10-12-2000 Toshiki USUI Q61232 5709 TITLE OF INVENTION:

INK-JET RECORDING APPARATUS, RECORDING METHOD

INK-0ET	RECORDING AP	PARATUS,	RECOR	DING METHOD	AND RE	CORDING	MEDIUM	
APPLN. TYPE	SMALL ENTITY	ISSUE FE	EE	PUBLICATION FEE	TOTAL	FEE(S) DUE	DATE DUE	
nonprovisional NO		\$1330		\$0	\$1330		09/22/2004	
EXAMINER		ART UNIT		CLASS-SUBCLASS				
Ly T. TRAN		285	3		—			
Change of correspondence FR 1.363).	e address or indication of "F	ee Address" (37	names of	ting on the patent front p up to 3 registered pate	nt attorneys or	1 2001	HRUE MION,	
Change of corresponde Address form PTO/SB/12		agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent						
"Fee Address" indication PTO/SB/47; Rev 03-02 of Number is required.	on (or "Fee Address" Indica or more recent) attached. Us	tion form e of a Customer	attorneys o will be prin	r agents. If no name is I	egistered patent listed, no name	3		
	RESIDENCE DATA TO E							
PLEASE NOTE: Unless been previously submittee (A) NAME OF ASSIGNI	an assignee is identified be d to the USPTO or is being SE	anorminoa arraor nobi	uran cover. C	on the patent. Inclusion completion of this form is E: (CITY and STATE OR	NO I a substitut	is only appropr for filing an as	iate when an assignment h signment.	
SEIKO EPSON	CORPORATION	ľ ,	TOKYO,	JAPAN				
ease check the appropriate	assignee category or catego	ories (will not be prin	nted on the pa	tent); 🚨 individual	© corporation	or other private g	group entity Q governme	
. The following fee(s) are	enclosed:	4b.	Payment of F	ce(s):	······································	<u></u>	, , , ,	
Ussue Fee	•		A check	is attached for th	he NOA F	ees navme	nt	
☐ Publication Fee ☐ Advance Order - # of Copies		A check is attached for the NOA Fees payment. Please charge any payment deficiency and credit overpayment to PODA 19-4880. Inv overpayment, this form).						
rector for Patents is reques	ted to apply the Issue Fee a	nd Publication Fee (if any) or to r	e-apply any previously pa	id issue fee to the	ne application id	entified above.	
uthorized Signature) Grant K. Ro	Warren	(Date) A	1,278		· 		-25	
NOTE; The Issue Fee and Publication Fee (if required) will not be a other than the applicant; a registered attorney or agent; or the assign interest as shown by the records of the United States Patent and Tradema			ccepted from anyone 09/22/2004 RF		REEKADUS 00	EKADU2 00000115 09686959		
			or other par Office.	rty in A4 EC-1501		1330.00 OF		
ompleted application form ase. Any comments on t aggestions for reducing the atent and Trademark O 2313-1450. DO NOT SE	ion is required by 37 CFR by the public which is to fi is governed by 35 U.S.C. I is to complete, including gent to the USPTO. Time will he amount of time you re is burden, should be sent office, U.S. Department of END FEES OR COMPLE or Patents, Alexandria, Virgon the public which is the complete or Patents, Alexandria, Virgon the public of Patents, Alexandria, Virgon the public or Patents, Alexandria, Virgon the public of Patents, Alexandria, Virgon the P	il vary depending up equire to complete to the Chief Informa- of Commerce, Ale	ation is required to process. This collect and submitting the individual of the form a sation Officer, exandria, Vir THIS ADDR	red to so an ion is so an ion is get the ridual nd/or U.S. ginia ESS.				
END 10: Commissioner f	or Patents, Alexandria, Virg	ginia 22313-1450.						

TRANSMIT THIS FORM WITH FEE(S)

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.